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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

NIFORM LIMITED OFFERING EXEMPTION

ONIB AFFROVAL						
OMB Number:						
Expires: April 30, 2008						
Estimated average burden						
hours per respon	nse 16.00					

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
1	1				

	<u> </u>
Name of Offering Check if this is an amendment and name has changed, and inc	idicate change.)
Bella Pictures, Inc. Convertible Note and Warrant Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOF
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION	DATA IIII IIII IIII IIII IIII IIII IIII
1. Enter the information requested about the issuer	06064072
Name of Issuer (check if this is an amendment and name has changed, and indic	cate change.)
Bella Pictures, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
580 Market Street Ste. 300, San Francisco, CA 94104	415-398-2050
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Same as above	Same as above
Brief Description of Business	
Wedding Photography and Videography	
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed	other (please specify):
business trust limited partnership, to be formed	PROCESSET
Month Year	。いっつにつうド
Actual or Estimated Date of Incorporation or Organization: 0 6 0 4	Actual
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service al	abbreviation for State: DEC 1 5 2008
CN for Canada; FN for other foreign ju	
GENERAL INSTRUCTIONS	FINANCIAL

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2/99) 1 of 9

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Kramer, Tom Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104 Beneficial Owner Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Kringas, Jr., John G. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104 □ Executive Officer ☐ General and/or □ Director Beneficial Owner Managing Partner Full Name (Last name first, if individual) White, George Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104 Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Lefcourt, Jenny Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Parsons, John Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104 ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Foundation Capital IV, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 70 Willow Road, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Rhodes, Mitch Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Executive Officer □ Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Holland, Paul Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104 General and/or Beneficial Owner □ Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Morgen, Jeff Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bella Pictures, Inc., 580 Market Street Ste. 300, San Francisco, CA 94104 Executive Officer ☐ Director General and/or ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer □ Director General and/or Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter ■ Beneficial Owner ☐ Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. IN	FORMAT	ION ABO	UT OFFE	RING				
		, .									Yes	No 53
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									\boxtimes			
2. What is	the minim	um investm									\$0.00	
2. 77112110				oc accepte	a mom any	morroun.		•			Yes	No
3. Does the offering permit joint ownership of a single unit?								\boxtimes				
a persor states, l broker o	sion or sim to be liste ist the nam or dealer, ye	ilar remune d is an asso e of the bro ou may set t	ration for so ciated perso oker or deal forth the inf	olicitation of on or agent er. If more	of purchaser of a broker than five (s in connect or dealer re (5) persons	tion with sa egistered with be listed	les of secur ith the SEC	ties in the and/or wit	offering. If h a state or		
Full Name	(Last name	irst, it ind	ividuai)									
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)				· · · · · · · · · · · · · · · · · · ·	•	<u> </u>
Name of A	ssociated B	roker or De	aler		<u> </u>	·		<u></u>				
States in W	hich Perso	n Listed Ha	s Solicited of	or Intends to	o Solicit Pu	rchasers						
		or check ind		' - '					·		,	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	(LA)	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	(OK) [WI]	[OR] [WY]	[PA] [PR]
Full Name Business of	· · · · · · · · · · · · · · · · · · ·	: first, if ind		Street, City	y, State, Zip	Code)						
Name of A	ssociated B	roker or De	aler					-				
States in W	hich Perso	n Listed Ha	s Solicited (or Intends to	o Solicit Pu	rchasers			· · · · · · · · · · · · · · · · · · ·			
,		or check inc										All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
[IL] [MT]	(IN) [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	(LA) [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[⊍K] [WI]	[WY]	[PR]
		first, if ind			······································					····	· ·	
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	roker or De	aler	 					<u>-</u>			
		n Listed Ha								<u> </u>		
		or check inc										. All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
(IL) [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
fverl	(SC)	[OD]	[]	[14]	[UI]	[4,1]	[.,1]	(/ 1)	[,, ,]	[,, ,]	[., .]	(1.1.)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 🗋 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security \$0.00 \$1,360,622.58 ☐ Common ☐ Preferred \$0.00 Partnership Interests\$0.00 \$0.00 Other (Specify _\$0.00 \$0.00 \$1,360,622.58 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors..... \$1,360,622.58 <u>13</u> Non-accredited Investors <u>0</u> \$0.00 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505..... Regulation A..... Rule 504..... Total.... \$0.00 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$0.00 Printing and Engraving Costs.... \$0.00 Legal Fees..... \boxtimes \$25,000.00 Accounting Fees П \$0.00 Engineering Fees \$0.00 Sales Commissions (specify finders' fees separately)..... \$0.00 Other Expenses (identify) \$0.00 Total..... X \$25,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSE	ES AND U	SE OF PROCI	EEDS	
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This difference is the "adj	usted gros.	1 s		\$1,446,872. <u>58</u>
5.	Indicate below the amount of the adjusted gross proceeding the purposes shown. If the amount for any purpose is left of the estimate. The total of the payments listed forth in response to Part C - Question 4.b above.					
	Question , to acord.			Payments officers, Directors, Affiliates	&	Payments to Others
	Salaries and fees			\$0.00		<u>\$0.00</u>
	Purchase of real estate			\$0.00		\$0.00
	Purchase, rental or leasing and installation of n	nachinery and equipment		\$0.00		<u>\$0.00</u>
	Construction or leasing of plant buildings and	facilities		\$0.00		<u>\$0.00</u>
	Acquisition of other business (including the va offering that may be used in exchange for the					
	issuer pursuant to a merger)			\$0.00		\$0.00
	Repayment of indebtedness			<u>\$0.00</u>	\boxtimes	<u>\$0.00</u>
	Working capital			<u>\$0.00</u>	\boxtimes	\$1,446,872.58
	Other (specify):					
				\$0.00		<u>\$0.00</u>
	Column Totals		🗖	\$0.00		\$1,446,872.58
Total Payments Listed (column totals added)				\$1,446,872.58		
		D. FEDERAL SIGNATURE		·		
sig	te issuer has duly caused this notice to be signed by gnature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accredi	urnish to the U.S. Securities and Exchange	e Commiss	ion, upon writte	r Rule 505, t en request of	he following its staff, the
Iss	suer (Print or Type)	Signature		Date	27	<u></u>
В	ella Pictures, Inc.	Melen		Novem	ber , 2006	
	nme of Signer (Print or Type) litch Rhodes	Title of Signer (Part or Type) President				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)